

provision for changes in legally mandated fringe benefits, a similar provision will be included in prospective NF rates

- (d) If, for reasons beyond the control of a NF, rates have not been redetermined within three months after receipt of its reports, an interim adjustment for inflation may be made to existing rates for cash flow purposes. The inflation increment would be based upon the number of months from the midpoint of the current rate period to the beginning point of the new rate period. The interim rate will be subject to a retroactive adjustment to the beginning of the prospective rate period upon determination of the approved rate via the methodology described in these guidelines.
- (e) NFs may also request interim adjustments to rates during a prospective rate period for either legally mandated matters or for extraordinary factors beyond their control. Such adjustments, if approved, would not apply retroactively unless, for reasons beyond the control of the NF, costs are affected retroactively.
- (f) No provision for inflation will be made with respect to costs for buildings, land, moveable equipment, interest and lease, as determined by sections 3.11, 3.12, and 3.13 nor to special amortization of capital costs as determined by section 3.8.

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3.20 Total rates

- (a) Rates will not contain allowances for a) working capital or b) an incentive for NFs participating in a cooperative buying group.

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3.21 Appeals process

- (a) When an NF believes that, owing to an unusual situation, the application of these guidelines results in an inequity (except for the application of section 3.2 (f)), two levels of appeals are available: a Level I Appeal heard by representatives from the Medicaid program; and

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a Level II Appeal heard before an Administrative Law Judge.

1. Level I Appeal:- A request for a Level I should be submitted in writing to the New Jersey Medicaid program.
 - i. Requests for Level I appeals must be submitted in writing within 20 calendar days of receipt of notification of the rate by the facility.
 - ii. A facility shall identify its rate appeal issues in writing to the Medicaid program within 50 calendar days of receipt of notification of the rate by the facility.
 - iii. Documentation supporting the appealed rate issues must be submitted to the Medicaid program within 80 calendar days of receipt of notification of the rate by the facility.

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iv. Adjustments resulting from the Level I appeal will be effective as follows:

- (1) At the beginning of the prospective reimbursement period if an error in computation was made by the Division's Office of Health Facilities Rate Setting or if the appeal was submitted within the specified period.
- (2) On the first of the month following the date of appeal for non-computational matters if the appeal is submitted after the specified period.

v. The date of submission is defined as the date received by the Division's Office of Health Facilities Rate Setting.

vi. The analyst's recommended resolutions will first be reviewed at appropriate levels within the Division's Office of Health Facilities Rate Setting, and will then be forwarded for approval by the Director or a designee of the Director.

2. Level II Appeal (Administrative Law Appeal): If the NE is not satisfied with the results of the Level I Appeal, it may request a hearing before an Administrative Law Judge.

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- i. Request for an administrative hearing must be submitted in writing to the Medicaid program.
- ii. In accordance with N.J.A.C. 10:49-5.3(a), requests for an Administrative hearing will be considered timely filed if they are submitted within 20 days from the mailing of the ruling in the Level I appeal.
- iii. The Administrative hearing will be scheduled by the Office of Administrative Law and the facility will be notified accordingly.
- iv. At the Administrative hearing, the burden is upon the NF to demonstrate entitlement to cost adjustments under CARE Guidelines (Cost Accounting and Rate Evaluation System). A complete set of CARE Guidelines may be obtained from the Medicaid program.

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3.22 FUNDING

The funding for governmental peer grouping will be comprised of the following:

1. The federal share will be 50 percent of the cost calculated through the peer grouping methodology.
2. The State share will continue as if there was no governmental peer grouping.
3. The contribution from each county which has a county governmental facility will be the difference between State share and the total non-federal share of the Medicaid rate.

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CARE

SECTION "D"

RATES

This section of the CARE Manual describes the detailed method by which rates are calculated for NFs in accordance with the Guidelines incorporated in the "RULES" section of the CARE manual. The reader should refer to the application sections of the Guidelines for a fuller understanding of this methodology.

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